

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		43	3/30/01
FORMALITY REVIEW	H-S	866	04-17-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	9	2	
2	4	2	
3	0	05	
4	0	05	
5	0	05	
6	0	05	
7	0	05	
8	0	05	
9	0	05	
10	0	05	
11	0	05	
12	0	05	
13	0	05	
14	0	05	
15	0	05	
16	0	05	
17	0	05	
18	0	05	
19	0	05	
20	0	05	
21	0	05	
22	0	05	
23	0	05	
24	0	05	
25	0	05	
26	0	05	
27	0	05	
28	0	05	
29	0	05	
30	0	05	
31	0	05	
32	0	05	
33	0	05	
34	0	05	
35	0	05	
36	0	05	
37	0	05	
38	0	05	
39	0	05	
40	0	05	
41	0	05	
42	0	05	
43	0	05	
44	0	05	
45	0	05	
46	0	05	
47	0	05	
48	0	05	
49	0	05	
50	0	05	

Claim	Final	Original	Date
51	9	2	
52	4	2	
53	0	05	
54	0	05	
55	0	05	
56	0	05	
57	0	05	
58	0	05	
59	0	05	
60	0	05	
61	0	05	
62	0	05	
63	0	05	
64	0	05	
65	0	05	
66	0	05	
67	0	05	
68	0	05	
69	0	05	
70	0	05	
71	0	05	
72	0	05	
73	0	05	
74	0	05	
75	0	05	
76	0	05	
77	0	05	
78	0	05	
79	0	05	
80	0	05	
81	0	05	
82	0	05	
83	0	05	
84	0	05	
85	0	05	
86	0	05	
87	0	05	
88	0	05	
89	0	05	
90	0	05	
91	0	05	
92	0	05	
93	0	05	
94	0	05	
95	0	05	
96	0	05	
97	0	05	
98	0	05	
99	0	05	
100	0	05	

Claim	Final	Original	Date
110	9	2	
112	4	2	
113	0	05	
114	0	05	
115	0	05	
116	0	05	
117	0	05	
118	0	05	
119	0	05	
120	0	05	
121	0	05	
122	0	05	
123	0	05	
124	0	05	
125	0	05	
126	0	05	
127	0	05	
128	0	05	
129	0	05	
130	0	05	
131	0	05	
132	0	05	
133	0	05	
134	0	05	
135	0	05	
136	0	05	
137	0	05	
138	0	05	
139	0	05	
140	0	05	
141	0	05	
142	0	05	
143	0	05	
144	0	05	
145	0	05	
146	0	05	
147	0	05	
148	0	05	
149	0	05	
150	0	05	

If more than 150 claims or 10 actions
 staple additional sheet here

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Best Available Copy

10/10/01
 04-17-01